

# Harrison County Sheriff's Department

## Law Enforcement Training Academy

This Certifies That

**Sergeant Phil L. Taylor**

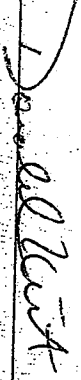
has successfully completed a  
80 hour course of instruction in

**Basic Jail/Correctional Officer Academy**

conducted by the Harrison County Sheriff's Department  
University of Southern Mississippi - Gulf Coast Law Enforcement Training Academy

**December 13, 1996**

Academy Director



Sheriff, Harrison County, Mississippi



6-00000-1001-2

LITHO IN U.S.A.

MARCH 98



*Presents this*  
**American Correctional Association**  
*Certificate of Completion*

to

**Phil Taylor**

*In Recognition of Your Continued Professional Development  
Through the Successful Completion  
of The 20 Hour  
Suicide Prevention in Custody Correspondence Course*

  
DIRECTOR  
PROFESSIONAL DEVELOPMENT

  
EXECUTIVE DIRECTOR

**July 1998**

DATE



*American Correctional Association*  
*Presents this*  
*Certificate of Completion*

*to*  
**Phil Taylor**

*In Recognition of Your Continued Professional Development  
Through the Successful Completion  
of The 40 Hour  
Working with Special Needs Offenders Correspondence Course*

**October 1998**

DATE

DIRECTOR  
PROFESSIONAL DEVELOPMENT

A handwritten signature in black ink, appearing to read 'John J. Hume', written over a horizontal line.

EXECUTIVE DIRECTOR

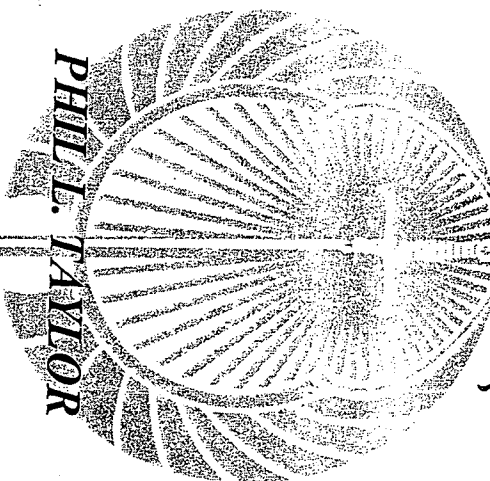
A handwritten signature in black ink, appearing to read 'Ernest Sandley', written over a horizontal line.



PPCT MANAGEMENT SYSTEMS, INC.

Certificate of Training

Certifies that



has successfully completed PPCT Management Systems Course requirements for

**PPCT Defensive Tactics System Instructor**

At *Hattiesburg, MS*

This Day Of *November, 1998*

Seminar Instructor

Expiration Date

*11/6/01*

*Bruce H. Shible*  
Executive Director  
PPCT Management Systems, Inc.



# HARRISON COUNTY SHERIFF'S DEPARTMENT

*George H. Payne, Jr.*  
Sheriff

Post Office Box 1480  
Gulfport, Mississippi 39502

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SPECIAL ORDER NUMBER: 01-235

DATE: JUNE 15, 2001

INDEX AS: SPECIAL TRAINING ASSIGNMENT

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SUBJECT: METAL-TEC 1400

TO: CAPT. PHIL TAYLOR  
SGT. WILLIAM DRECHSEL  
SGT. ALVIN KING  
SGT. KENNETH ROGERS  
DEPUTY SEAN O'NEILL

You have been scheduled to attend the above reference training, July 12, 2001 at the Mississippi Law Enforcement Training Academy in Pearl, MS. The training is scheduled to begin at 10:00 am until 12:00 pm.

This Order effective July 12, 2001.

*[Signature]*  
George H. Payne, Jr.  
Sheriff

GHP:DGR/ds

Cc: Major Cook  
Major Allen  
Chief Gaston  
Inv-Krieger  
Personnel File

# FREE Certification Course

Exclusively for Law Enforcement/Corrections Trainers

Sponsored by

**Mississippi Police Supply Company, Inc. & METAL-TEC 1400**

Learn how to improve officer safety, reduce liability and possible lawsuits by implementing the METAL-TEC 1400. Now each officer in your department can conduct a more thorough search for concealed weapons on suspects in the field.

**METAL-TEC 1400** is the only Silent Vibrating metal/weapons detector designed for law enforcement and corrections. Each person completing this *hands on training* will become certified by the factory to train the members of their department. *This course is a must for departments wishing to improve officer safety and reduce liability.*

Each department registered to attend will receive **ONE FREE METAL-TEC 1400**. Up to five trainers from each department may register to attend, **at no charge**. Each of the five trainers will receive a curriculum handbook and training video.

## Topics Covered in this training & certification course

- ▶ Locating metal/weapons which may have been overlooked by a conventional hand search
- ▶ Determining the density of metallic objects being detected (is it a gun, knife or razor)
- ▶ How to pinpoint the location of metal objects once detected
- ▶ How to effectively search opposite sex/juvenile suspects with minimal physical contact
- ▶ Determining object's shape and size to identify threat level
- ▶ Plus many more topics!

**HOST:** Mississippi Law Enforcement Training Academy  
Pearl, Mississippi

**DATE:** July 12, 2001

**TIME:** 10:00 a.m. to 12:00 p.m.

**TO REGISTER:** Fax the form below to Mississippi Police Supply Company at 662-756-2013.

Registration Form	
Department Name:	Harrison County Sheriff's Dept
Contact Person:	Major Riley
Telephone Number:	(228) 896 0177
Number of Officers Attending:	05

METAL-TEC is a Registered Trademark of Torfino Enterprises, Inc.

Mississippi Police Supply Company, Inc. • P. O. Box 36 • Ruleville, MS 38771 • 800-488-7561

Participant Capt Phil Taylor

HARRISSON COUNTY SHERIFF'S DEPARTMENT  
IN - SERVICE TRAINING

ETHICS & HUMAN RELATIONS  
CLASS

FEB 2, 2001  
DATE

TO: 1100 HRS FROM: 0900 HRS.  
HOURS OF TRAINING

MAJOR RILEY  
INSTRUCTOR

NAME: TAYLOR PHIL L  
LAST FIRST MIDDLE INITIAL

SSN: 426-33-8481 DOB: 10-11-64

PHONE: (228) 865-0447 PGR: 867-3379

DUTY ASSIGNMENT POST: CAPTAIN (SECURITY)

SIGNATURE: \_\_\_\_\_  
EMERGENCY CONTACT INFO (IN CASE OF EMERGENCY CONTACT)

MR./MRS. RACHEL TAYLOR PHONE: (228) 865-0447  
ADDRESS: 4628 28TH STREET GULFPORT, MS  
RELATIONSHIP: WIFE

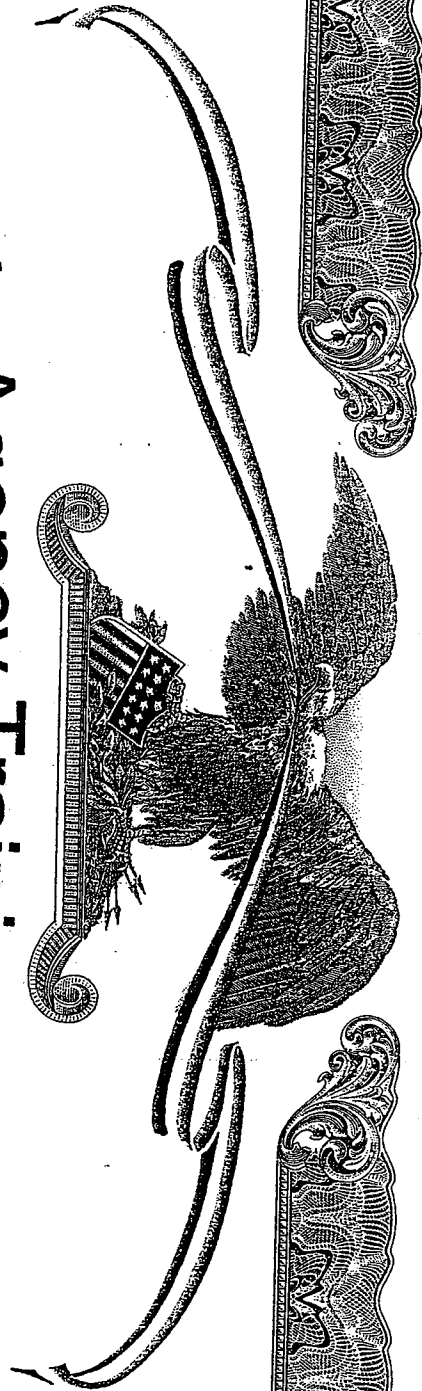
DO NOT WRITE BELOW

CLASS HOURS FOR TIME SHEET \_\_\_\_\_  
CERTIFIED AREA: YES NO #  
GRADING SYSTEM: PASS FAIL  
RECERTIFICATION DATE: \_\_\_\_\_

INSTRUCTOR NAME \_\_\_\_\_

CERTIFICATION \_\_\_\_\_

3-ALDF-1D-02



# Public Agency Training Council

National Criminal Justice  
CERTIFICATE OF ATTENDANCE

**PHIL TAYLOR**

Has Completed  
24 Hours of Instruction In

**First Line Supervision, Leadership Skills**

Biloxi, Mississippi

November 20, 21 & 22, 2000

*James Currie*

James Currie

Instructor

*James R. Alsip*

James R. Alsip

Director





## INSTRUCTOR TRAINING COURSE

## PRETEST/POST TEST

## ANSWER SHEET

Name PHIL L. TAYLOR SSN. 426-23-8481

- |  |  |
|--|--|
| 1. (a) (b) <input checked="" type="radio"/> (c) (d)  | 18. <input checked="" type="radio"/> (a) (b) (c) (d) |
| 2. (a) <input checked="" type="radio"/> (b) (c) (d)  | 19. (a) (b) (c) <input checked="" type="radio"/> (d) |
| 3. (a) (b) <input checked="" type="radio"/> (c) (d)  | 20. <input checked="" type="radio"/> (a) (b) (c) (d) |
| 4. (a) (b) <input checked="" type="radio"/> (c) (d)  | 21. (a) (b) <input checked="" type="radio"/> (c) (d) |
| 5. (a) (b) <input checked="" type="radio"/> (c) (d)  | 22. (a) (b) (c) <input checked="" type="radio"/> (d) |
| 6. <input checked="" type="radio"/> (a) (b)          | 23. (a) (b) (c) <input checked="" type="radio"/> (d) |
| 7. <input checked="" type="radio"/> (a) (b)          | 24. (a) (b) <input checked="" type="radio"/> (c) (d) |
| 8. (a) <input checked="" type="radio"/> (b)          | 25. (a) (b) (c) <input checked="" type="radio"/> (d) |
| 9. <input checked="" type="radio"/> (a) (b)          | 26. <input checked="" type="radio"/> (a) (b) (c) (d) |
| 10. (a) <input checked="" type="radio"/> (b)         | 27. (a) (b) (c) <input checked="" type="radio"/> (d) |
| 11. <input checked="" type="radio"/> (a) (b)         | 28. (a) (b) <input checked="" type="radio"/> (c) (d) |
| 12. <input checked="" type="radio"/> (a) (b) (c)     | 29. (a) <input checked="" type="radio"/> (b) (c) (d) |
| 13. (a) <input checked="" type="radio"/> (b) (c)     | 30. <input checked="" type="radio"/> (a) (b) (c) (d) |
| 14. <input checked="" type="radio"/> (a) (b) (c) (d) | 31. (a) <input checked="" type="radio"/> (b) (c) (d) |
| 15. (a) <input checked="" type="radio"/> (b) (c) (d) | 32. (a) (b) (c) <input checked="" type="radio"/> (d) |
| 16. (a) (b) (c) <input checked="" type="radio"/> (d) | 33. (a) (b) <input checked="" type="radio"/> (c) (d) |
| 17. (a) <input checked="" type="radio"/> (b) (c) (d) |  |



# HARRISON COUNTY SHERIFF'S DEPARTMENT

*George H. Payne, Jr.*  
Sheriff

Post Office Box 1480  
Gulfport, Mississippi 39502

**INTER-OFFICE MEMO**

**Corrections Division: 00-**

**August 30, 2000**

**TO: Capt. Taylor**

**REF: INSTRUCTING NEW HIRE FTO TRAINING**

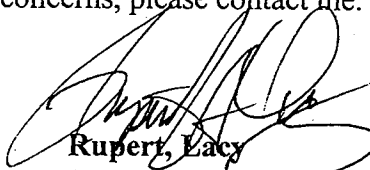
Be advised that you have been selected to teach the following subject(s) for the above mentioned training for the Harrison County Correctional Division:

9/1/00	1030-1130	Professionalism & Ethics
	1330-	Post Assignments

We will need a copy of your Lesson Plan for the Training Files. If you need copies, please advise, so that we can have them ready for class.

Class will be conducted in the Shift Briefing Room.

If you have questions or concerns, please contact me.

  
Rupert, Lacy  
Services Captain

cc: Training File  
Consent Order File



# HARRISON COUNTY SHERIFF'S DEPARTMENT

JOE PRICE, Sheriff

228-865-7060

228-865-7095

November 30, 1999

TO: Lt. Michael McCaleb

FROM: Lt. Phil Taylor

RE: PPCT Classes

I would like to request permission to teach PPCT classes on December 20<sup>th</sup> and 21<sup>st</sup>.  
There will be approximately 12 students.

*Phil Taylor*  
LT. PHIL TAYLOR

*12/1/99*





# Multijurisdictional Counterdrug Task Force Training

This Certifies That

**Phil L. Taylor**

Has Attended and Successfully Completed

**Criminal Street Gangs Basic**

**24 Training Hours**  
November 8, 1999 - November 10, 1999  
Baton Rouge, LA



*Paul J. Davis*  
MCTFT Director



**Corrections**

**Law Enforcement**



# Instructor Certificate

*This is to certify that*

**Phil L. Taylor**

*has successfully completed all requirements for the listed Instructor Course, and can train and certify other personnel in the Basic training program.*

**OC (Oleoresin Capsicum) Aerosol Instructor**

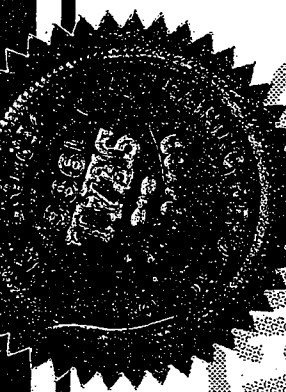
\_\_\_\_\_  
OCTOBER 29, 2001

*Expires*

*This, the* 29TH day of OCTOBER, 1999

\_\_\_\_\_  
MS 426238481

*Certification Number*



*Thomas J. Archambault*  
Instructor Trainer

*Thomas J. Archambault*  
President

# HARRISON COUNTY SHERIFF'S DEPARTMENT



**JOE PRICE, Sheriff**

228-865-7060

228-865-7095

**SPECIAL ORDER NUMBER: 99-242**

**DATE: OCTOBER 22, 1999**

**INDEX AS: SPECIALIZED TRAINING**



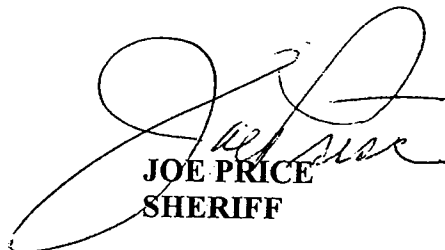
**SUBJECT: O. C. AEROSOL SPRAY CERTIFICATION COURSE – OCTOBER 29, 1999 – MGCCC APPLIED TECHNOLOGY CENTER**

**TO: LT. PHIL TAYLOR**



Be advised that I have received and approve the above captioned. By copy of this Order, Deputy Fran Palmer will secure the registration/tuition fee. This course will be held October 29, 1999, 8:00 a.m. to 4:00 p.m., at the MGCCC Applied Technology Center, Gulfport, MS.

This Order effective October 22, 1999.

  
**JOE PRICE**  
**SHERIFF**

JP/wr

cc: Administrative Master File  
Personnel File  
Major Melvin Brisolara  
Warden Bill Haden  
[REDACTED]  
Lt. Michael McCaleb

# HARRISON COUNTY SHERIFF'S DEPARTMENT



JOE PRICE, *Sheriff*

228-865-7060

228-865-7095

OCTOBER 4, 1999



TO: LT. MICHAEL McCaleb

FROM: LT. PHIL L. TAYLOR

RE: PRESSURE POINT CONTROL TACTICS CLASS



IF POSSIBLE, I WOULD LIKE TO INSTRUCT A PRESSURE POINT CONTROL TACTICS CLASS FOR APPROXIMATELY 12 STUDENTS ON OCTOBER 13th AND 14th AT THE ADULT DETENTION FACILITY. EACH SESSION WILL LAST FROM 0800 TO 1300 HOURS.

THANK YOU FOR YOUR CONSIDERATION



*Phil L. Taylor*  
LT. PHIL L. TAYLOR

OK mmm 10/4/99



# HARRISON COUNTY SHERIFF'S DEPARTMENT



JOE PRICE, *Sheriff*

228-865-7060

228-865-7095



September 23, 1999



TO: Lt. Michael McCaleb

FROM: Lt. Phil Taylor

RE: PPCT Class



If possible, I would like to teach a PPCT Class for approximately 17 students on September 29<sup>th</sup> & 30<sup>th</sup> at the Adult Detention Facility.

Thank you for your consideration.

*Lt. Phil S. Taylor*  
LT. PHIL TAYLOR

OK Lt. McCaleb 9/24/99

MAY 18 1999

## TEST USE OF FORCE

1. WHAT ARE THE SEVEN STEPS IN THE FORCE CONTINUUM.

- 1) VERBAL PERSUASION
- 2) VERBAL WARNING
- 3) SHOW OF FORCE
- 4) LESS THAN LETHAL WEAPON
- 5) PHYSICAL CONTACT
- 6) USE OF IMPACT WEAPON
- 7) USE OF DEADLY FORCE

2. WHEN CAN YOU USE DEADLY FORCE.

WHEN PROTECTING THE LIFE OF AN OFFICER OR ANOTHER PERSON FROM DEATH OR BODILY HARM.

3. HOW MUCH FORCE MAY YOU USE.

ONLY THE AMOUNT OF FORCE NECESSARY TO MAKE THE INMATE STOP

4. WHAT FOUR REQUIREMENTS ARE NEEDED IN REPORTING A USE OF FORCE.

- 1) AN ACCOUNTING OF EVENTS LEADING TO THE USE OF FORCE
- 2) AN ACCURATE DESCRIPTION OF THE INCIDENT
- 3) A DESCRIPTION OF THE FORCE AND HOW IT WAS USED
- 4) A DESCRIPTION OF THE INJURIES SUFFERED

NAME: PHIL L. TAYLOR

BADGE #: 344

DATE: 5-17-99

# HARRISON COUNTY SHERIFF'S DEPARTMENT

NOT PRICE SENSITIVE

DATE: 1-29-99

NAME: PHIL L. TAYLOR

SSN: 426-23-8481

I HAVE BEEN ADVISED OF AND UNDERSTAND THE POST ORDER FOR  
WATCH COMMANDER LIEUTENANT. I UNDERSTAND IT IS MY  
RESPONSIBILITY TO KEEP CURRENT WITH CHANGES IN THESE ORDERS BY  
REVIEWING THE POSTED ORDERS AT MY DUTY STATION AND SIGNING  
THAT I HAVE READ SAID ORDERS

Phil L. Taylor

SIGNATURE

# HARRISON COUNTY SHERIFF'S DEPARTMENT

JOE PRICE, SHERIFF

DATE: 1-22-99  
NAME: PHIL L. TAYLOR  
SSN: 426-23-8481

I HAVE BEEN ADVISED OF AND UNDERSTAND THE POST ORDER FOR  
BACK CONTROL I UNDERSTAND IT IS MY  
RESPONSIBILITY TO KEEP CURRENT WITH CHANGES IN THESE ORDERS BY  
REVIEWING THE POSTED ORDERS AT MY DUTY STATION AND SIGNING  
THAT I HAVE READ SAID ORDERS.

Phil L. Taylor #344  
(SIGNATURE)



# HARRISON COUNTY SHERIFF'S DEPARTMENT

JOE PRICE, SHERIFF

DATE: 1-22-99

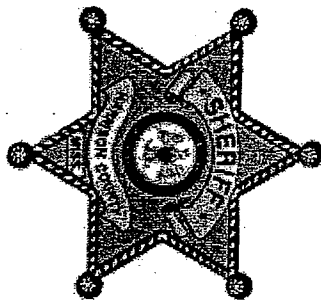
NAME: PHIL L. TAYLOR

SSN: 426-23-8481

I HAVE BEEN ADVISED OF AND UNDERSTAND THE POST ORDER FOR  
CENTRAL CONTROL / DISPATCH. I UNDERSTAND IT IS MY  
RESPONSIBILITY TO KEEP CURRENT WITH CHANGES IN THESE ORDERS BY  
REVIEWING THE POSTED ORDERS AT MY DUTY STATION AND SIGNING  
THAT I HAVE READ SAID ORDERS.

Phil L. Taylor #344  
(SIGNATURE)

**Harrison County Sheriff's Department**  
**Correctional Division**



*This is to certify that*

**CAPT. PHIL TAYLOR**

*has successfully completed*

**CPR/FIRST AID**

*This the 26<sup>th</sup> day of JUNE, 2001*

**Lt. A. Kelly**  
*Instructor*

# METAL-TEC 1400

## Factory Training Course Certificate of Completion

Issued The 12th Day of July, 2001 to

*Phil L. Taylor*

For successfully completing the Factory Training and Certification Course, and is now Factory Certified to Train others within their department in the proper use of the METAL-TEC 1400.

Certificate No. - 101567

7/11/03  
Expiration Date

Tom Raines  
Course Instructor



# HARRISON COUNTY SHERIFF'S DEPARTMENT

JOE PRICE, SHERIFF

DATE: 1-14-99

NAME: TAYLOR, PHIL #344

SSN: 426-23-8481

I HAVE BEEN ADVISED OF AND UNDERSTAND THE POST ORDER FOR  
A-BLOCK TOWER I UNDERSTAND IT IS MY  
RESPONSIBILITY TO KEEP CURRENT WITH CHANGES IN THESE ORDERS BY  
REVIEWING THE POSTED ORDERS AT MY DUTY STATION AND SIGNING  
THAT I HAVE READ SAID ORDERS

Phil J. Taylor #344

(SIGNATURE)



# HARRISON COUNTY SHERIFF'S DEPARTMENT

JOE PRICE, SHERIFF

DATE: 1-14-99  
NAME: TAYLOR, PHIL #344  
SSN: 426-23-8481

I HAVE BEEN ADVISED OF AND UNDERSTAND THE POST ORDER FOR  
A-BLOCK FLOOR. I UNDERSTAND IT IS MY  
RESPONSIBILITY TO KEEP CURRENT WITH CHANGES IN THESE ORDERS BY  
REVIEWING THE POSTED ORDERS AT MY DUTY STATION AND SIGNING  
THAT I HAVE READ SAID ORDERS.

Phil L. Taylor #344  
(SIGNATURE)

# HARRISON COUNTY SHERIFF'S DEPARTMENT

JOE PRICE, SHERIFF

DATE: 1-14-99  
NAME: TAYLOR, PHIL  
SSN: 426-23-8481

I HAVE BEEN ADVISED OF AND UNDERSTAND THE POST ORDER FOR  
B-BLOCK TOWER. I UNDERSTAND IT IS MY  
RESPONSIBILITY TO KEEP CURRENT WITH CHANGES IN THESE ORDERS BY  
REVIEWING THE POSTED ORDERS AT MY DUTY STATION AND SIGNING  
THAT I HAVE READ SAID ORDERS.

Phil J. Taylor #344  
(SIGNATURE)

# HARRISON COUNTY SHERIFF'S DEPARTMENT

JOE PRICE, SHERIFF

DATE: 1-14-99  
NAME: TAYLOR, PHIL #344  
SSN: 426-23-8481

I HAVE BEEN ADVISED OF AND UNDERSTAND THE POST ORDER FOR  
B-BLOCK FLOOR I UNDERSTAND IT IS MY  
RESPONSIBILITY TO KEEP CURRENT WITH CHANGES IN THESE ORDERS BY  
REVIEWING THE POSTED ORDERS AT MY DUTY STATION AND SIGNING  
THAT I HAVE READ SAID ORDERS

Phil J. Taylor #344  
SIGNATURE

# HARRISON COUNTY SHERIFF'S DEPARTMENT

JOE PRICE, SHERIFF

DATE: 1-14-99  
NAME: TAYLOR, PHIL #344  
SSN: 426-23-8481

I HAVE BEEN ADVISED OF AND UNDERSTAND THE POST ORDER FOR  
C-BLOCK TOWER I UNDERSTAND IT IS MY  
RESPONSIBILITY TO KEEP CURRENT WITH CHANGES IN THESE ORDERS BY  
REVIEWING THE POSTED ORDERS AT MY DUTY STATION AND SIGNING  
THAT I HAVE READ SAID ORDERS.

Phil S. Taylor #344  
(SIGNATURE)

# HARRISON COUNTY SHERIFF'S DEPARTMENT

JOE PRICE, SHERIFF

DATE: 1-14-99  
NAME: TAYLOR, PHIL  
SSN: 426-23-8481

I HAVE BEEN ADVISED OF AND UNDERSTAND THE POST ORDER FOR  
C-BLOCK FLOOR I UNDERSTAND IT IS MY  
RESPONSIBILITY TO KEEP CURRENT WITH CHANGES IN THESE ORDERS BY  
REVIEWING THE POSTED ORDERS AT MY DUTY STATION AND SIGNING  
THAT I HAVE READ SAID ORDERS

Phil S. Taylor #344  
SIGNATURE



# HARRISON COUNTY SHERIFF'S DEPARTMENT

JOE PRICE, SHERIFF

DATE: 1-14-99  
NAME: TAYLOR, PHIL #344  
SSN: 426-23-8481

I HAVE BEEN ADVISED OF AND UNDERSTAND THE POST ORDER FOR  
D-BLOCK TOWER I UNDERSTAND IT IS MY  
RESPONSIBILITY TO KEEP CURRENT WITH CHANGES IN THESE ORDERS BY  
REVIEWING THE POSTED ORDERS AT MY DUTY STATION AND SIGNING  
THAT I HAVE READ SAID ORDERS

Phil J. Taylor #344  
(SIGNATURE)

# HARRISON COUNTY SHERIFF'S DEPARTMENT

JOLY PRICED SHERIFF

DATE: 1-14-99  
NAME: TAYLOR, PHIL #344  
SSN: 426-23-8481

I HAVE BEEN ADVISED OF AND UNDERSTAND THE POST ORDER FOR  
D-BLOCK FLOOR I UNDERSTAND IT IS MY  
RESPONSIBILITY TO KEEP CURRENT WITH CHANGES IN THESE ORDERS BY  
REVIEWING THE POSTED ORDERS AT MY DUTY STATION AND SIGNING  
THAT I HAVE READ SAID ORDERS

Phil S. Taylor #344  
SIGNATURE

© Goes 4/2/96

*Dr. Michael A. McCaleb*  
Dr. Michael A. McCaleb, Instructor

*Presented.*  
*this 4th day of December, 1998*

**Harrison County Sheriff's Department**  
**University of Southern Mississippi - Gulf Coast**  
**Law Enforcement Training Academy**

*Phil J. Taylor*  
This is to Certify That

**LAW ENFORCEMENT ACADEMY**  
**HARRISON COUNTY**  
**GULF COAST**

has successfully completed the 40 hour Law Enforcement Course at the Harrison County Sheriff's Department University of Southern Mississippi - Gulf Coast Law Enforcement Training Academy

*Randy Cook*  
Randy Cook, Academy Director

*Sheila J. Pryce*  
Sheila J. Pryce, Harrison County, Mississippi

UTHO IN USA

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## CIVIL LIABILITY RELEASE FORM

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I, PHIL L. TAYLOR, ATTENDED THE COURSE CONDUCTED BY  
OFFICER'S NAME  
THE HARRISON COUNTY SHERIFF'S DEPARTMENT ENTITLED "INSTRUCTOR  
DEVELOPMENT". I ACKNOWLEDGE RECEIPT OF MATERIALS PROVIDED BY  
THE INSTRUCTOR, DR. MICHAEL MC CALEB, SPECIFICALLY THE PAPERS  
ENTITLED, "FUNDAMENTALS OF PROFESSIONAL LIABILITY FOR LAW  
ENFORCEMENT TRAINERS".

I, PHIL L. TAYLOR, STATE THAT I HAVE BEEN PROVIDED  
OFFICER'S NAME  
A COPY OF "THE FUNDAMENTALS OF PROFESSIONAL LIABILITY FOR LAW  
ENFORCEMENT TRAINERS" AND I HAVE AN UNDERSTANDING OF SAME.

NAME: PHIL L. TAYLOR

BADGE #: 344

ADDRESS: 4628 28TH STREET

GULLEPORT, MS

SOCIAL SECURITY #: 426-23-8481

SIGNATURE OF PERSON CONDUCTING CLASS

12-  
DATE

POSITION

# HARRISON COUNTY SHERIFF'S DEPARTMENT

**JOE PRICE, Sheriff**

228-865-7060

228-865-7095



**SPECIAL ORDER NUMBER: 98-118**

**DATE: NOVEMBER 24, 1998**

**INDEX AS: SPECIALIZED TRAINING**

**SUBJECT: INSTRUCTOR DEVELOPMENT COURSE - NOVEMBER 30- DECEMBER 4, 1998  
0800 HOURS TO 1700 HOURS EACH DAY - HARRISON COUNTY SHERIFF'S  
DEPARTMENT/USM**

**TO: CAPTAIN VICTOR SMITH  
LIEUTENANT WALTER PITTS  
SGT. MURRAY ALEXANDER  
SGT. DAVID DUBOIS  
SGT. PHIL TAYLOR**

**INVESTIGATOR BILLY MCCONNELL  
DEPUTY ANTHONY KELLY  
DEPUTY ALAN GREEN  
DEPUTY MICHELLE HERMAN  
DEPUTY RAY POLK**

I am in receipt of and approve the above captioned. You will need to report to the Harrison County Training Academy on November 30, 1998, at 0800 hours. Students should park in Parking Lot "E."

This Order effective November 30, 1998

*By: Deputy Marie J. Price  
for:*

**JOE PRICE  
SHERIFF  
HARRISON COUNTY, MISSISSIPPI**

JP/ml

Attachment

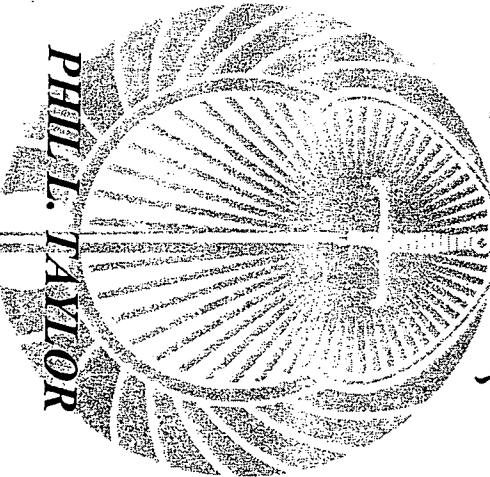
cc: Administrative Master File  
Personnel File  
Major E.R. Cook  
Warden Bill Haden  
Captain Bruce Carver  
Lieutenant Dean Weatherford  
Shift Captains x3



PPCT MANAGEMENT SYSTEMS, INC.

Certificate of Training

Certifies that



has successfully completed PPCT Management Systems Course requirements for

**PPCT Defensive Tactics System Instructor**

At  
*Hattiesburg, MS*

This  
*6th*

Day Of  
*November, 1998*

Seminar Instructor

Expiration Date

*11/6/01*

*Bruce H. Skidell*  
Executive Director  
PPCT Management Systems, Inc.



*American Correctional Association*  
*Presents this*  
*Certificate of Completion*

*to*  
**Phil Taylor**

*In Recognition of Your Continued Professional Development  
Through the Successful Completion  
of The 40 Hour  
Working with Special Needs Offenders Correspondence Course*

**October 1998**

DATE

**DIRECTOR  
PROFESSIONAL DEVELOPMENT**

**EXECUTIVE DIRECTOR**



**American Correctional Association**  
*Presents this*  
**Certificate of Completion**

*to*  
**Phil Taylor**

*In Recognition of Your Continued Professional Development  
Through the Successful Completion  
of The 20 Hour  
Suicide Prevention in Custody Correspondence Course*

  
DIRECTOR  
PROFESSIONAL DEVELOPMENT

  
EXECUTIVE DIRECTOR

**July 1998**

DATE

# Suicide Prevention in Custody

## Final Test

### STUDENT ANSWER SHEET

Phil Taylor

Name \_\_\_\_\_ Date 7-6-98  
(Please print.)

Address \_\_\_\_\_ Home ☐ Work ☒

\_\_\_\_\_  
C/O Lt. Rupert H. Lacy  
\_\_\_\_\_  
P. O. Box 1480  
\_\_\_\_\_  
Gulfport, MS 39502  
\_\_\_\_\_

(Note: Your test results will be sent to the above address.)

Place of Employment Harrison County Sheriff's Dept.  
(Please do not use acronyms/abbreviations.)

Phone Number \_\_\_\_\_ Home ☒ Work ☐ ( 228-896-0601 ) \_\_\_\_\_

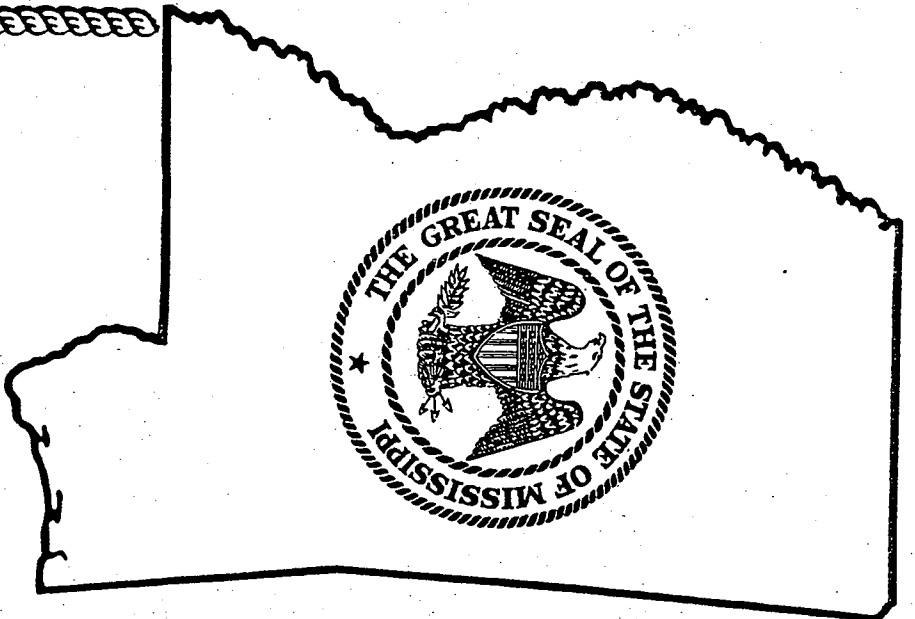
### MULTIPLE CHOICE

Score \_\_\_\_\_

Write the letter of the correct answer in the space provided next to the number of each question.

- |             |              |              |              |
|-------------|--------------|--------------|--------------|
| 1. <u>A</u> | 8. <u>A</u>  | 14. <u>B</u> | 20. <u>C</u> |
| 2. <u>D</u> | 9. <u>C</u>  | 15. <u>C</u> | 21. <u>D</u> |
| 3. <u>D</u> | 10. <u>D</u> | 16. <u>A</u> | 22. <u>D</u> |
| 4. <u>D</u> | 11. <u>C</u> | 17. <u>D</u> | 23. <u>C</u> |
| 5. <u>C</u> | 12. <u>C</u> | 18. <u>B</u> | 24. <u>C</u> |
| 6. <u>B</u> | 13. <u>A</u> | 19. <u>B</u> | 25. <u>A</u> |
| 7. <u>C</u> |              |              |              |

**FILE COPY**  
FINAL TEST



# STATE OF

# MISSISSIPPI

Board of Law Enforcement Officer Standards and Training

Hereby awards this

## Professional Certificate

TO

PHIL L. TAYLOR

426-23-8481

This 4TH day of JUNE, 19 98

As being qualified to be a Mississippi Law Enforcement Officer under Provisions of Chapter 474, General Laws of Mississippi, 1981.

Certificate No. 11536

Director  
Board on Law Enforcement  
Standards and Training

Chairman  
Board on Law Enforcement  
Standards and Training

*Sam O. Walker* *Russ Farnsworth*



# HARRISON COUNTY SHERIFF'S DEPARTMENT

## CORRECTIONAL OFFICER PROGRAM

### SERVICE TRAINING RECORD

BOOKING 4 FORMS

CLASS

3-10-98

DATE

HCDF

LOCATION

0730-0930

HOURS OF TRAINING

SGT. ANTHONY KELLY

INSTRUCTOR

NAME PHIL L TAYLORSSN 426-23-8481

SEX: (✓) MALE ( ) FEMALE

DOB 10-11-64HOME ADDRESS 4628 28TH STREETCITY GULFPORTSTATE MSZIP 39501TELEPHONE: HOME 865-0447OFFICE 896-3000Phil S. Taylor #34

OFFICER'S SIGNATURE

3-10-98

DATE

## EMERGENCY INFORMATION

NAME RACHEL J. TAYLORRELATIONSHIP WIFETELEPHONE: HOME 865-0447

OFFICE \_\_\_\_\_

CLASS HOURS 3.0

TEST SCORE: PRE \_\_\_\_\_

POST \_\_\_\_\_

CERTIFIED AREA: \_\_\_\_\_

(YES) (NO)

(PASS) (FAIL)

AK 343

INSTRUCTOR'S SIGNATURE

3/10/98

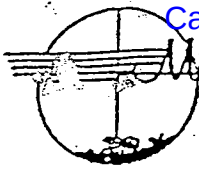
DATE

RECORDED: \_\_\_\_\_

DATE \_\_\_\_\_

BY: \_\_\_\_\_

INSTRUCTOR COMMENTS \_\_\_\_\_



# Mississippi Gulf Coast COMMUNITY COLLEGE

## CONTINUING EDUCATION/SPECIAL INTEREST/WORKFORCE TRAINING APPLICATION-REGISTRATION

Individuals who wish to enroll in semester hour credit courses must complete a MGCCC Application for Admission.

1. Social Security No. 426 - 03 - 8481

2. Location (check one)  
☐ George County Campus  
☐ Jackson County Campus  
☐ Jefferson Davis Campus  
☐ Perkinston Campus  
☐ Applied Tech. and Development Center  
☒ Keesler Center  
☐ West Harrison Center  
☒ Other HCSO ADC

3. TAYLOR Last Name PHIL First Name L Middle Initial MS Previous Last Name (optional)  
4628 28TH ST Mailing Address GPT City MS State 39501 Zip Code

8. HARRISON County of Residence 9. (601) 865-0447 Telephone 10. 10/11/64 Date of Birth

11. Ethnic/Racial Group  
☐ American Indian or Alaskan Native (AI)  
☒ Black/African American (BL)  
☐ Hispanic (SA)  
☐ White/Caucasian (CA)  
☐ Asian or Pacific Islander (OA)  
☐ Other (OT)

12. Sex: ☒ Male ☐ Female 13. Are you a high school graduate or GED equivalent? ☒ Yes ☐ No

14. If you have a disability, do you require accommodations? ☐ Yes ☒ No  
 If yes, please describe: \_\_\_\_\_

15. In case of emergency, please call: RACHEL TAYLOR Name 865-0447 Phone No.

The Family Educational Rights and Privacy Act provides for the publication or disclosure of certain directory information on students. Check below if you do not want your name, photograph or other directory information included in these publications.

☐ Directory Information

☐ News articles for publication in media

☒ Other, specify

12-15-97  
Date

Sgt. Phil S. Taylor #344  
Student Signature

### FOR COLLEGE USE ONLY

#### COLLEGE CODE (check one)

- ☐ 9093 Opportunity  
☐ 9107 New Horizons  
☐ 9286 Continuing Ed/AED  
☐ 9287 Special Interest  
☒ 9290 Ingalls (fee assessed)  
☐ 9994 Inplant  
☐ 9993 Workforce  
☐ 9995 Basic Skills  
☐ 9996 ABE  
☐ 9997 GED  
☐ 9998 ESL

CE Class  
Prefix

Number

Name

Cost of Class/es  
Total Hours 2.0  
Contact CEU's

Suicide Prevention, Detection  
and Review of Policy (Annual Training)

1. \_\_\_\_\_  
 2. \_\_\_\_\_  
 3. \_\_\_\_\_  
 4. \_\_\_\_\_  
 5. \_\_\_\_\_  
 6. \_\_\_\_\_

Tuition \_\_\_\_\_ Cash \_\_\_\_\_  
 Registration \_\_\_\_\_ Check \_\_\_\_\_  
 Books \_\_\_\_\_ Money Order \_\_\_\_\_  
 Supplies \_\_\_\_\_ Deferment \_\_\_\_\_  
 Other Costs \_\_\_\_\_ Credit Card \_\_\_\_\_  
 Total Costs \_\_\_\_\_

**FILE COPY**

# HARRISON COUNTY SHERIFF'S DEPARTMENT

## CORRECTIONAL OFFICER PROGRAM

### SERVICE TRAINING RECORD

FIRE SAFETY  
CLASS

10-2-97  
DATE

HCDF  
LOCATION

0815 - 1015  
HOURS OF TRAINING

TONY BOND  
INSTRUCTOR

NAME PHIL L. TAYLOR SSN 426-23-8481

SEX: (☒) MALE ( ) FEMALE DOB 10-11-64

HOME ADDRESS 4628 28TH STREET

CITY GULFPORT STATE MS ZIP 39501

TELEPHONE: HOME 865-0447 OFFICE 896-3000

Phil L. Taylor  
OFFICERS SIGNATURE

10-02-97  
DATE

#### EMERGENCY INFORMATION

NAME RACHEL TAYLOR RELATIONSHIP WIFE

TELEPHONE: HOME 865-0447 OFFICE 452-4666

CLASS HOURS 2.0 TEST SCORE: PRE \_\_\_\_\_ POST \_\_\_\_\_

CERTIFIED AREA: \_\_\_\_\_ (YES) (NO) (PASS) (FAIL)

Tony Bond  
INSTRUCTORS SIGNATURE

10-2-97  
DATE

RECORDED: \_\_\_\_\_ DATE \_\_\_\_\_ BY: \_\_\_\_\_

INSTRUCTOR COMMENTS \_\_\_\_\_